



**Washington State
Department of Transportation**

Please complete this Notice of Mailing Address and return with the executed copies of the Contract and Bond documents to:

Washington State Department of Transportation
Contract Payment Section, Wing 3B
310 Maple Park Avenue SE
PO Box 47420, Olympia, WA 98504-7420

Notice of Mailing Address

To: Company Name and Address

GRANITE CONSTRUCTION COMPANY

**1525 E MARINE VIEW DR
EVERETT WA 98201-1927**

Contract No.

009193

Project Title

SR 9 ET AL Mt Baker Area BST 2018

Received by WSDOT	Federal Employer ID No. (IRS) 94-0519552	Statewide Vendor Number
Phone No. 425-551-3100	Fax No. 425-551-3116	E-Mail ashley.tonsgard@gcinc.com
Industrial Insurance Account No. 572,672-04	State Excise Tax Registration No. 409 023 062	UBI Number 409 023 062
Is your business: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation Please complete and return the attached W-9 form.		

Correspondence Address: Check the box next to the appropriate delivery address for receipt of **correspondence**.

☐ Physical Address ☐ Postal Delivery Address (If different from physical address)

Same as above

Payment Address: Indicate appropriate delivery address for **payment disbursement**. If selecting "other" please fill out address correctly, if it is not filled out payment may be delayed.

☐ Physical Address (listed above) ☒ Other (specify): → Granite Construction Company
PO Box 742478
Los Angeles, CA 90074-2478

Payment Delivery Method: (Indicate preferred method of delivery)

☐ Mailed Warrant (Check)

☒ **Direct Deposit (EFT)**

The Statewide Vendor/Payee record determines this payment method - please make note which you have chosen. If you wish to change that information or do not know that it is current, please update the attached Statewide Payee Registration form DOT Form 134-102

Carol Chonzena

Contact Name (Please Print)

Carol Chonzena

Contractor's Signature

1/29/18

Date